

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-041-20454
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 023845
7. Lease Name or Unit Agreement Name: Lambirth
8. Well Number 3
9. OGRID Number 162928
10. Pool name or Wildcat South Peterson; Penn Associated

Pit or Below-grade Tank Application ☐ or Closure ☐  
Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_  
Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4393' GR
2. Name of Operator Energen Resources Corporation	
3. Address of Operator 3300 N. A St., Bld.g 4, Ste 100 Midland, TX 79705	
4. Well Location Unit Letter G : 1980 feet from the North line and 1980 feet from the East line Section 31 Township 5-S Range 33-E NMPM County Roosevelt	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- (1) MIRU pulling unit. (2) Install rod stripper. Unseat pump and POOH laying down rods and pump.
- (3) Install BOPE. Release tubing anchor and POOH w/tbg.
- (4) RU wireline Co. RIH w/CIBP and set @ 7835'. Dump bail 20' cmt on top of plug. POOH. RIH w/CIBP and set @ 7520'.
- (5) RIH w/tbg and tag CIBP @ 7520'. Circulate hole w/treated 2% KCl water. Pressure test casing to 500 psig. POOH and lay down tubing.
- (6) Load csg w/treated 2% KCl water.
- (8) Notify NMOCD and perform MIT to 500 psig.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been will be constructed or closed according to NMOCD guidelines ☒ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Carolyn Larson TITLE Regulatory Analyst DATE 11-8-05

Type or print name Carolyn Larson

E-mail address: clarson@energen.com

Telephone No. 432/684-3693

For State Use Only

APPROVED BY Harry W. Wink

Conditions of Approval, if any:

OCD FIELD REPRESENTATIVE II/STAFF MANAGER  
TITLE \_\_\_\_\_ DATE \_\_\_\_\_

NOV 10 2005